

ALARM PERMIT APPLICATION

PLEASE READ CAREFULLY BEFORE FILLING OUT APPLICATION

- 1. Permit holder-We must have the name, driver's license number, business address and telephone numbers (home & business) of the *person* who will be responsible for the alarm system. A COMPANY NAME IS NOT ACCEPTABLE.
- 2. Signature of *APPLICATION/PERMIT HOLDER* must be the signature of the *person* listed as the *PERMIT HOLDER*.
- 3. Please list all zip codes and area codes.
- 4. You must list *THREE* people with access who can respond to the alarm within 30 minutes of police request. Failure to provide full information will result in rejection of the application.

5. In the blank labeled "Address of Permit Holder" if the alarm site is a business, list the home address for the permit holder. If this is a residence, list the business address of the permit holder.

Name of Business or Name of Occupant				Date of Application	
Address of Alarm Site		Zip Code		BusinessResidential	
Permit Holder (Person responsible for the Alarm System)			Title (if any)	Driver's License #	
Last	First	M.I.			
Address of Permit Holder			Home Phone # of Permit Holder		
City	State	Zip Code	Business Phor	Business Phone # of Permit Holder	
City	State	Zip Code	Cell Phone # o	of Permit Holder	
Primary Person to Respond to Alarm			Home Phone		
			Business Phone		
Last	First	M.I.	Cell Phone		
Second Person to Respond to Alarm			Home Phone		
			Business Phone		
Last	First	M.I.	Cell Phone		
Third Person to Respond to Alarm			Home Phone		
			Business Phone		
Last	First	M.I.	Cell Phone		
This Application is for: New Permit Renewal If new owner Date of Purchase			Type of Alarm (Check all that apply) Burglary Robbery Personal Hostage/Robbery		
Name of Alarm Company Phone number:					
Has there ever been another permit issued for this alarm site? (Yes) (No) (Unknown) If yes, list permit #					
OFFICE USE ONLY	Date received: Received By:				
	Date Issued:		Permit #:		

I have carefully read the completed application and know the same is true and correct and hereby agree that if a permit is issued, I will comply with all provisions of the Euless City Ordinance #1863 and applicable State Laws. I accept responsibility for all fees and fines that may result from the operation of the alarm system serving the above premises.

Return to: Euless Police Department	
Attn: Pam Trawick	
1102 W. Euless Blvd.	
Euless, Texas 76040	Signature of Applicant